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Dear Friends,

With the Legislature on hiatus for the season, I have time to do a little soul searching about what we've accomplished so far and what we hope to do in the year ahead.

It was a difficult and contentious year in Sacramento, there's no sense pretending otherwise. The governor's special election and the politics surrounding it seemed to cast a shadow over everything.

Despite that, however, I was able to move forward on some of my policy goals. In some cases, I was successful. In others, there remains much work to be done.

The governor vetoed my bill that would make it easier for rural districts to use existing funds to buy safer new buses. My bill to extend the \$500 tax credit to families that care for aging and ailing relatives stalled in the Senate. But we eliminated some red tape to make it easier to provide services to seniors, and we made it easier for counties to get year-round firefighting protection. And, of course, I'm ready to go on my right to die bill as soon as we get started again in January.

Just hours after the gavel fell, ending legislative activity for the year, my staff and I gathered to set our goals for the coming year. We'll be hammering out specifics for months to come, because, as you know, we face daunting challenges on so many fronts: the budget, education, healthcare, and the graying of California to name but a few.

We're already sorting through suggestions that you and your neighbors have sent in.

Let me thank you in advance for your support as we look for ways to make things better for all of us.

Patty Berg

Assemblywoman, 1st District

Still Waiting Word on the Needle-Exchange Bill

In the coming week or two, we should have final word on whether the governor will sign my disease-fighting needleexchange bill.

As I may have told you already, this bill, which cuts bureaucratic red tape and makes it easier for cities and counties to operate needle-exchange programs that slow the spread of HIV/AIDS and Hepatitis-C, was approved by the Legislature and is waiting the governor's decision.

It's the second time in two years that I've sent this bill to the governor. Last year, amid opposition from some law enforcement groups, the governor vetoed the bill.

This year, we rolled up our sleeves, sat down with law enforcement representatives and, thanks to the work of many helpful friends, we not only convinced them to drop their opposition, they actually became supporters of the bill.

There is solid consensus that providing clean needles does in fact cut down on the spread of deadly diseases.

And that's good for the entire community, because it is not just intravenous drug users who suffer when disease spreads.

I'll let you know next time whether this worthy bill has been signed into law.

Linking Medicare Recipients with Expert Help

As I've said many times, I support universal health care. I don't see why any American should have to worry about whether their basic health needs will be met.

The new federal prescription drug benefit is a pretty good example of why we need comprehensive reform.

Although this historic plan for Medicare and Medi-Cal recipients may offer real savings to a great many Californians, it is being implemented in a way that can be frustrating and confusing for seniors and others who receive government-backed healthcare.

Recipients must make choices in the coming months about these plans. They have to pick the one that's best for them, and they have to avoid making a choice that could either cost them extra money or create a conflict with their existing health coverage.

Fortunately, there are experts who can help, and who will do it for free.

"You have to decide," I've said over and over again. "But you don't have to do it alone."

I want to do everything I can to make sure everyone in my district who is eligible for these new plans gets the best advice possible to make the best choice. Of course, I'd prefer if everyone had the kind of comprehensive coverage envisioned in Sen. Sheila Kuehl's SB 840. But we're going to make the best of what we have now.

So, here's what you need to do: Make a list of your medicines, know their name, strength, number of pills in the bottle, and whether they're brand-name or generic.

Then, when details about specific plans come in the mail, study and compare them, looking for the one that covers most of your medicines at the best cost.

I soon will be announcing dates and places for a number of Town Hall meetings where you can get together with experts to help choose the right plan.

I'm going to be teaming up with the Health Insurance Counseling and Advocacy Program (HICAP).

These wonderful people are going to give free counseling about these changes. They are getting special training so they know just how to help.

And, while I hope you'll attend gatherings, whether they're hosted by me or by HICAP alone, you don't have to wait until then to start getting help.

You can get information and assistance by calling HICAP toll-free at (800) 434-0222.

4.1 million Californians are eligible for Medicare, that's more than 1 out of 9 of us who rely on government health care. More than 1 million of those receive help from both the state and federal governments.

The Wisdom of Respecting Our Right to Die

A few decades ago, when many of us were in the blush of youth, and others were not yet born, would-be cultural visionaries talked about being "in the now" and urged us to "live for today."

It was radical stuff at the time, calling, as it did, for an end to the up-tight days of the Eisenhower era.

We don't talk that way anymore. And yet, living in the present has become so deeply ingrained in our consciousness, it seems we've lost our ability to think about tomorrow.

As an example, the federal government recently reported that Americans, on average, are saving only 2 cents out of every \$100 they bring home. It's the second-lowest savings rate since before the Great Depression.

Everyone knows that when old age comes, they will need money for rent and food and medical bills. Yet we're in denial about retirement planning. Instead, we've adopted a jackpot mentality, dreaming of a large inheritance or a winning lottery ticket.

This mindset of postponement and denial has presented the greatest challenge as I rally support for the Compassionate Choices Act, which would allow terminally ill Californians to end their own lives. I think it's an even

bigger hurdle than opposition based on religion.

Some of us simply don't want to admit that there will come a time when healing is no longer an option.

If we must imagine death at all, we envision a peaceful passing, easy and gentle, in our sleep if possible.

Sadly, this is very like the jackpot mentality many of us rely on for financial security. Few will have the idealized death they envision. And few will have an agonizing passing. Most will have something in the middle, neither entirely cruel nor entirely merciful.

Think of death with dignity as an insurance policy against a death that is mercilessly delayed, either by science or by the opinions of others. It would be there only for those who desire it, and because of its many safeguards, would never be imposed on any who don't seek it.

Like many insurance policies, we may never need to make a claim against it. But if we do, we will be glad it is there.

It is wise to plan for tomorrow. It is prudent to put something aside for old age.

And it is good planning and good public policy to set in place laws that give us choices about the limits of our endurance during our final days.

Coffee Break

Conservation Conservation ENVIRONMENT GENERATIONS															
W	F	V	В	S	M	U	G	G	Р	А	В	U	А	Р	GENERALIONS GLASS
R	E	U	S	E	J	Q	Р	L	L	0	I	D	Н	Α	HYBRID
0	V	U	Т	I	S	N	Α	R	Т	Α	I	R	K	Ρ	LEGACY
Χ	С	N	С	С	F	S	I	Η	0	R	S	L	Ρ	E	PAPER
В	Ι	K	E	G	Т	Y	W	V	В	Α	Α	S	Y	R	PLASTIC
Ρ	Т	Ι	V	I	E	А	V	Y	W	W	0	J	С	S	RECYCLE
Y	G	R	С	Ε	Т	Ν	Η	R	S	K	В	X	A	Ι	REDUCE
Y	D	Ε	0	Ε	С	R	Ε	R	A	L	0	S	G	K	REUSE
Z	R	C	R	S	J	U	M	R	F	X	M	D	Ε	0	SOLAR
D	A	Y	A	Р	G	M	D	0	A	R	G	V	L	Ν	SORT
X	G	С		G	Z	M	A	Ε	Т	Т	K	V	Q	Η	TRANSIT
W	Ι	L	E	D	C	F	L	S	R	Т	Ι	W	W	M	WALK
0	K	Ε	R	Ν	X	V	F	V	Z	C	V	0	S	Ι	WATER
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J	N	R	L	W	W	A	K	Х	Ū	L	M	Т	Н	S	Words can be written diagonally, bottom to top or backwards.